



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

**RECEIVED**

By Carol Day at 8:46 am, Aug 10, 2015

Complete this report in duplicate at the time of the regular monthly preventative maintenance. Send copy to Department of Health and Senior Services; retain original in department.

ALCO SENSOR IV SN 105452	PRINTER SN 097.3564.331	DATE OF INSPECTION 07/31/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 1200 Main St, Grandview		TIME OF INSPECTION 6:45 pm

**CHECKLIST:** Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

**BREATH ALCOHOL ACCURACY STANDARDS**

☒ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER Guth Labs LOT # 14200 EXP. DATE 08/05/2016

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN DR5385 SIMULATOR EXP DATE 07/14/2016

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

- ☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE  
☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE  
☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 .104%

TEST 2 .105%

TEST 3 .104%

☒ RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:  
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	1	(0-.04)	(.05-.09)	(.10-.14)	1	(.15-.19)	(OVER .19)
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

Instrument meets DOH Specs.

**INSPECTING OFFICER**

SIGNATURE

TYPE II PERMIT NUMBER EXPIRATION DATE  
230233 10/17/2015

PRINT NAME

Sgt Ryan Sharp

TELEPHONE NUMBER  
(816) 316-4904

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
2875 James Boulevard  
Poplar Bluff, MO 63901



**GUTH LABORATORIES, INC.**

690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-684-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14200 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on August 6, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1213% (w/vol) ethyl alcohol. The expiration date for this lot number is August 5, 2016 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

***NIST Traceability:***

*Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.*

*All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.*

AS IV Serial no: 105452  
Version no: 532B

TEST RECORD 00211

Temp Date Time 210L

VOID: RFI  
12 07/31/15 19:02

Subject Name

Subject I.D.

*SNIP 230233*  
Operator Name, I.D.

Location

AS IV Serial no: 105452  
Version no: 532B

TEST RECORD 00209

Temp Date Time 210L

Air Blank:  
07/31/15 18:58 .000  
Calibration Check:  
21 07/31/15 18:58 .105

Subject Name

*SNIP*  
Subject I.D.

*230233*

Operator Name, I.D.

Location

AS IV Serial no: 105452  
Version no: 532B

TEST RECORD 00210

Temp Date Time 210L

Air Blank:  
07/31/15 19:00 .000  
Calibration Check:  
22 07/31/15 19:00 .104

Subject Name

Subject I.D.

*SNIP 230233*  
Operator Name, I.D.

Location

AS IV Serial no: 105452  
Version no: 532B

TEST RECORD 00208

Temp Date Time 210L

Air Blank:  
07/31/15 18:56 .000  
Calibration Check:  
21 07/31/15 18:56 .104

Subject Name

*test*  
Subject I.D.

Operator Name, I.D.

*SNIP 230233*  
Location



STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

2

**PERMIT**  
**TYPE II**  
**RYAN A SHARP**

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

**DATAMASTER, INTOX DMT, ALCO-SENSOR IV W/PRINTER**

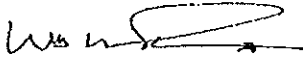
for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 10/17/2013

NUMBER 230233

EXPIRES 10/17/2015

MO 580-0771 (8-10)

  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

  
,acting director  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (18-10)

	STATE OF MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM
	<b>INSTRUMENT OPERATOR CARD</b>
<small>The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.</small>	
	
Operator SHARP, RYAN Permit No 230233 Date issued 10/17/2013 Date Expires 10/17/2015	